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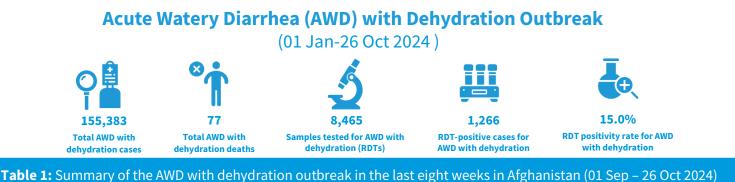
INFECTIOUS DISEASE OUTBREAKS SITUATION REPORT | Epidemiological week #43-2024

No. 43 (20 - 26 Oct 2024)

Disease Outbreaks	پنج AWD with dehydration	Dengue fever (Suspected)	CCHF (Suspected)	Measles (Suspected)	COVID-19 (Confirmed)	Malaria (Confirmed)
Cumulative Cases 2024	155,383	3,263	1,148	51,229	11,619	71,794
Cumulative deaths 2024 (CFR %)	77 (0.05)	1 (0.03)	93 (8.1)	246 (0.5)	66 (0.6)	3 (0.004)

(Data from 607 (99.1%) out of 613 sentinel sites)

*A data entry error was detected from one of the provinces and the total number of measles suspected cases were corrected from 54,088 to 51,229.



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Indicators	W36	W37	W38	W39	W40	W41	W42	W43	Trend line
Number of cases	5,528	4,463	4,177	3,657	3,228	3,067	2,955*	2,806	* * * * * * *
Number of deaths	2	1	2	2	3	2	1	4	
CFR (%)	0.0	0.0	0.0	0.1	0.1	0.1	0.0	0.1	

*A delayed reporting was experienced during week 42-2024 and the number of AWD with dehydration was corrected from 2,954 to 2,955.

- The epi-curve shows a decreasing trend since week 31-2024, which could be linked to the end of the summer season (Figure 1).
- During week 43-2024, 2,806 AWD with dehydration cases with 4 associated deaths were reported from 171 districts, which shows a 5.0% decrease in the number of cases compared to the previous week.
- The 4 new deaths were all males, while 3 of them were under-five years old, reported from 3 provinces: Badakhshan (2), Parwan (1), and Urozgan (1).
- During week 43-2024, no new district reported an AWD with dehydration alert.
- The highest cumulative incidence of AWD with dehydration per 10,000 population was reported from Paktya (125.8) followed by Nimroz (118.7), Logar (97.7), and Kabul (76.3) (Figure 2).
- Since the beginning of 2024, a total of 155,383 AWD with dehydration cases and 77 associated deaths (CFR=0.05%) were reported from 348 districts. Out of the total cases, 86,025 (55.4%) were under-five children, and 76,957 (49.5%) were females.
- Since the beginning of 2024, 8,465 Rapid Diagnostic Tests (RDTs) have been conducted on AWD with dehydration cases, of which 1,266 tests turned positive (positivity rate 15.0%).

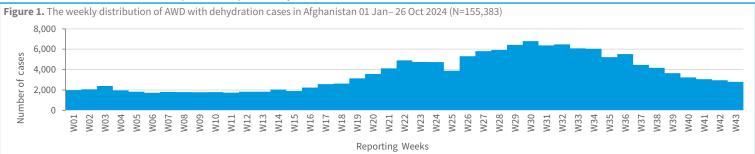
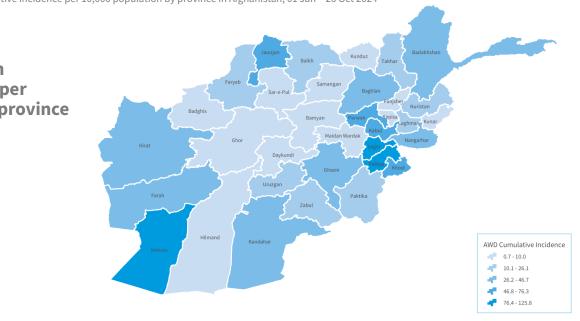


Figure 2. AWD with dehydration cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan – 26 Oct 2024

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AWD with dehydration cumulative incidence per 10,000 population by province 01 Jan - 26 Oct 2024



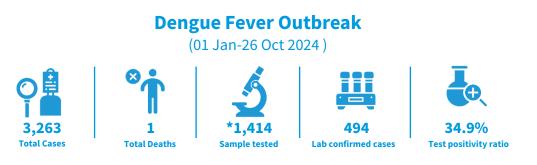
Updates on the preparedness and response to the AWD with dehydration outbreak

Since the beginning of 2024, the following activities have been conducted:

- A total of 124 sentinel sites' focal points and Community Health Supervisor (CHS) including 26 females have been trained on Event-based Surveillance procedures in Bamyan province.
- A total of 485 Surveillance sentinel sites' FPs including 8 females have been trained on E-surveillance (automated analysis) from Badghis, Farah, Herat and Ghor provinces.
- A total of 29 Surveillance Supporting Team members (SSTs) from Nangarhar, Kunar, Laghman, and Nuristan provinces were trained on sample collection, storage, and shipment of surveillance-targeted diseases.
- A total of 403 sentinel sites' focal points (including 24 females) have been trained on surveillance procedures in Kabul province, East, South, North, and West regions.
- A total of 210 HCWs have been trained on AWD with dehydration case management in 5 regions: Central region (70 including 15 females), East region (35 including 15 females), South region (35 all males), North region (35 including 5 females), and Northeast region (35 including 17 females).
- A total of 38 Data Management Officers, Data Assistants, and Data Entry Clerks (including 3 females) have been trained on data management and analysis.
- A total of 114 Cary Blair kits (100/kit) and 424 RDT kits have been distributed to 7 WHO sub-offices.
- A total of 125 case management kits have been distributed to the affected communities.
- A total of 2,700 Information, Education, and Communication (IEC) materials (1,200 posters and 1,500 brochures) on AWD have been delivered by WHO to Ghor province. These IEC materials have been used in health facilities and flood-affected communities.

WASH update:

There are no updates for the past 2 weeks.



Note: Dengue fever laboratory data was reviewed, utilizing the confirmed case definition from WHO. This definition is characterized by confirmation through PCR, positive virus culture, DENV NS1 antigen detection, seroconversion of IgG in paired sera, or a significant increase (fourfold) in IgG titer in paired sera. The focus was placed on cases confirmed by PCR, excluding cases that were only positive for IgM or IgG based on a single sample <u>https://cdn.who.int/media/docs/default-source/outbreak-toolkit/dengue--outbreak-toolbox_20220921.pdf?sfvrsn=29de0271_2</u>

 Table 2: Summary of the dengue fever outbreak in the last eight weeks in Afghanistan (01 Sep – 26 Oct 2024)

Indicators	W36	W37	W38	W39	W40	W41	W42	W43	Trend line
Suspected cases	113	81	118	138	194	152	181	333	
suspected deaths	0	0	0	0	1	0	0	0	
CFR (%)	0.0	0.0	0.0	0.0	0.5	0.0	0.0	0.0	

• The epi curve of suspected dengue fever cases shows an increasing trend starting from week 26, reaching its highest peak in week 43 of 2024 (Figure 3).

• During week 43-2024, 333 suspected cases of dengue fever with no associated deaths were reported from Nangarhar province. This represents an 84.0% increase in the number of suspected cases compared to the preceding week.

• Since the beginning of 2024, the number of suspected dengue fever cases is higher than the 2-year average (2021-2022) and even higher than the number of suspected cases reported in the corresponding weeks in 2023 (Figure 4).

 Since the beginning of 2024, a total of 3,263 suspected cases of dengue fever with one associated death were reported (CFR=0.03%), out of which 1,539 (47.2%) were females, and 53 (1.6%) were under-five children. The geographical distribution and weekly change rate are shown in Figure 5.

• Since the beginning of 2024, a total of 1,414 samples have been tested, out of which 494 were positive by PCR (positivity rate 34.9%).

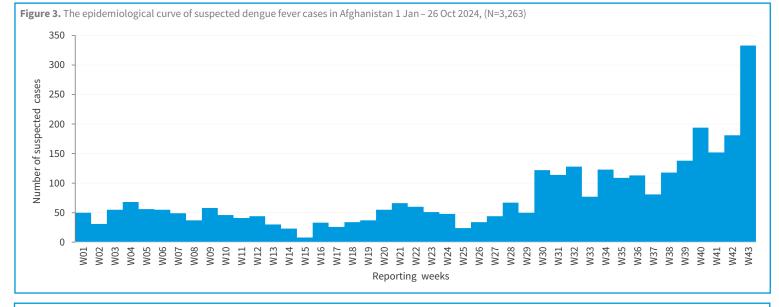


Figure 4: Comparison between the trends of suspected dengue fever cases in 2024 vs 2023 and 2-year average (2021-2022).

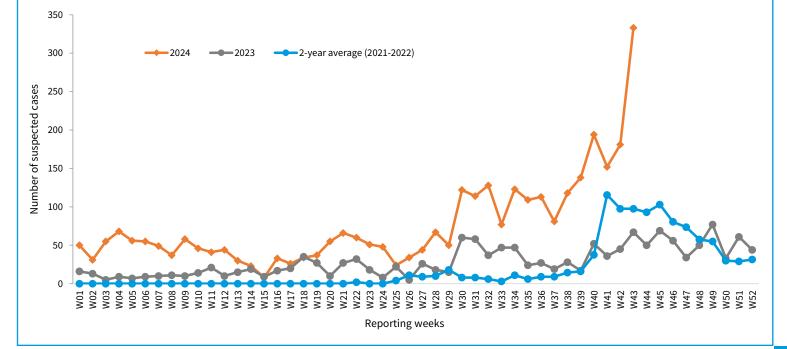
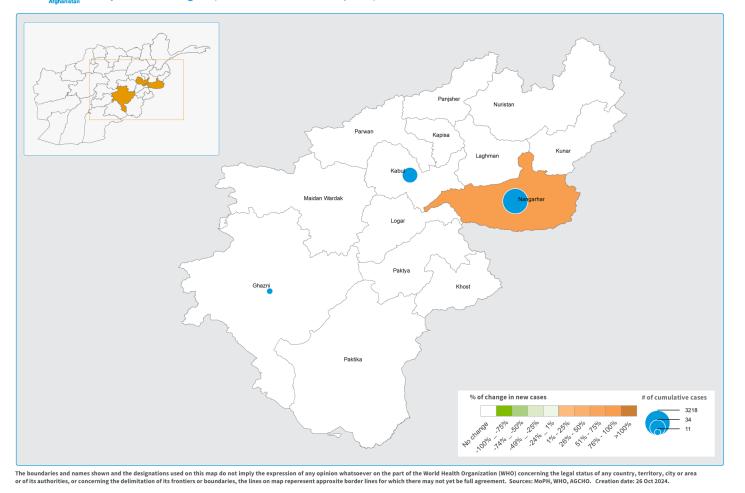


Figure 5. Geographical distribution of suspected dengue fever cases and percent change of new cases in Afghanistan, 01 Jan-26 Oct 2024

World Health Geographical distribution of suspected dengue fever cases in Nangarhar, Ghazni and Kabul provinces and weekly percent of changes (between weeks 42 and 43, 2024)



Updates in the response to the dengue fever outbreak

Since the beginning of 2024, the following activities were conducted:

- A total of 835 dengue fever RDT kits (10 tests/kit) have been distributed to South and East WHO sub-regional offices.
- A total of 386 HCWs (MDs and Nurses) have been trained on dengue fever case management from Kandahar (46 males and 42 females), Southeast region (64 males and 43 females), and East region (104 males and 87 females).
- A total of 150 lab technicians of HFs of Kandahar (28), Southeast region (54), and East region (68) have been trained on dengue fever diagnosis.

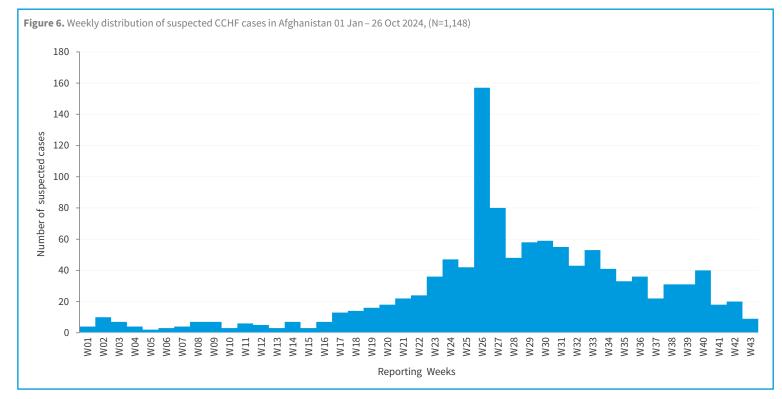
Outbreak of Crimean Congo Hemorrhagic Fever (CCHF) (01 Jan-26 Oct 2024) O

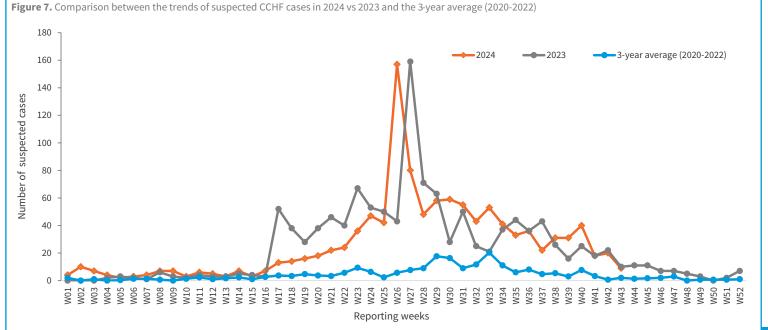


Table 3: Summary of the CCHF outbreak in the last eight weeks in Afghanistan (01 Sep – 26 Oct 2024)

Indicators	W36	W37	W38	W39	W40	W41	W42	W43	Trend line
Suspected cases	36	22	31	31	40	18	20	9	
Suspected deaths	5	1	3	1	1	1	3	0	
CFR (%)	13.9	4.5	9.7	3.2	2.5	5.6	15.0	0.0	

- The epi-curve of suspected CCHF cases shows a declining trend since week 27-2024 (Figures 6 & 7).
- During week 43-2024, 9 new suspected CCHF cases with no associated deaths were reported, which shows a 55.0% decrease in the number of suspected CCHF cases compared to the preceding week (Table 3).
- On Sep 21, 2024, a CCHF outbreak was reported from Kafshan valley of Shinwari district of Parwan province. After the investigations and contact tracings as of Oct 2, 2024, a total of 36 cases have been detected among which 11 were confirmed by RT-PCR testing. The cases were referred to the National Infectious Disease Hospital (NIDH) of Kabul.
- Since the beginning of 2024, a total of 1,148 suspected cases of CCHF with 93 associated deaths (CFR=8.1%) were reported. Out of the total cases, 1,143 (99.6%) were over-five, while 357 (31.1%) were females.
- The reported deaths were mostly over five years old (92, 98.9%), while 26 (28.0%) were females. Deaths were reported from 9 provinces Kabul (55), Balkh (18), Herat (5), Kunduz (4), Kapisa (4), Nangarhar (3), Baghlan (2), Badakhshan (1), and Kunar (1).
- Since the beginning of 2024, a total of 772 samples of suspected CCHF cases have been tested, out of which 251 were positive (positivity rate 32.5%) from 13 provinces.
- The positive cases were reported from 13 provinces Kabul (170), Balkh (23), Kunduz (20), Herat (11), Kapisa (11), Takhar (3), Baghlan (3), Nangarhar (3), Badakhshan (2), Jawzjan (2), Helmand (1), Paktika (1), and Kandahar (1).
- The highest cumulative incidence of suspected CCHF per 100,000 population in 2024 is reported from Balkh (9.5) followed by Kabul (7.7), Kapisa (6.6), and Jawzjan (5.7) provinces (Figure 8).



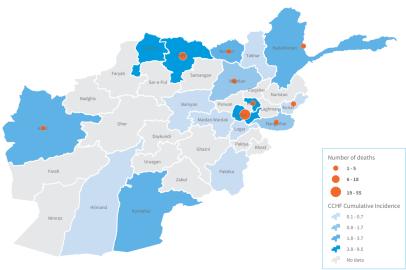


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Figure 8. Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province and provincial distribution of deaths in Afghanistan, 01 Jan – 26 Oct 2024

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Crimean-Congo Hemorrhagic Fever (CCHF) cases cumulative incidence per 100,000 population by province and provincial distribution of deaths 01 Jan -26 Oct 2024



Updates on the response to the CCHF outbreak

- On 2 Oct 2024, a team consisting of WHO, NDSR, and JACK team members visited the Shinwar district of Parwan province and provided the needed support as well as investigated and responded to the cluster of confirmed CCHF cases in the province.
- Since the beginning of 2024, the following activities have been conducted:
 - ° A total of 569 doses of ribavirin tablets and 1,540 doses of ribavirin injections have been distributed to the Infectious Disease Hospital (IDH) in Kabul and all WHO sub-offices.
 - ° Insecticides have been supplied to all 34 provinces for cattle spraying against ticks in animal markets by MAIL and FAO.
 - The national Crimean-Congo Hemorrhagic Fever (CCHF) preparedness and response plan has been drafted and shared with MoPH for endorsement. The plan aims to prepare and respond to the CCHF outbreak with focused interventions on surveillance/outbreak investigation, laboratory confirmation, case management and supplies, RCCE for high-risk individuals, and the capacity of healthcare workers.

RCCE

Since the beginning of 2024, the following RCCE activities have been conducted as a response to outbreaks:

- WHO has conducted a mass online awareness campaign through the WHO's official social media accounts (<u>Facebook</u> and <u>Twitter</u>) on CCHF and dengue fever preventive measures as a response to infectious diseases, reaching around 25,000 social media users.
- WHO has conducted a seven-day training and mass awareness campaign in Herat, Balkh, and Kandahar provinces, focused on Crimean-Congo Hemorrhagic Fever (CCHF) and other infectious diseases. The campaign included one day of training followed by six days of community outreach. During the campaign, WHO deployed around 110 (43 female and 67 male) social mobilizers to Herat (40 including 18 females), Balkh (35 including 16 females), and Kandahar (35 including 9 females) provinces and reached around 111,696 people through mass awareness campaigns on CCHF and other infectious diseases.

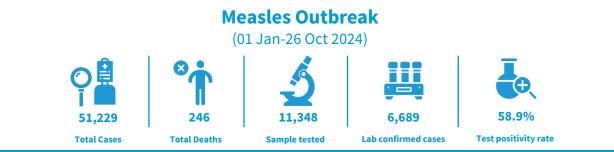


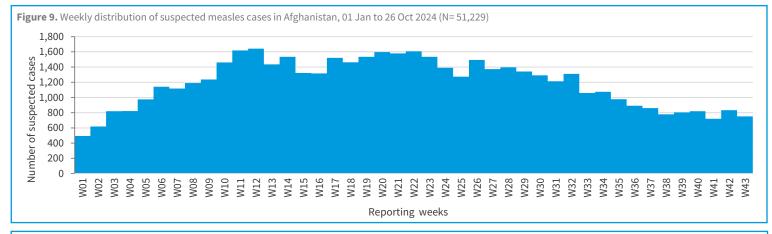
Table 4: Summary of the measles outbreak in the last eight weeks in Afghanistan (01 Sep – 26 Oct 2024)

Indicators	W36	W37	W38	W39	W40	W41	W42	W43	Trend line
Suspected cases	892	860	779	804	820	719	833 *	752	
Suspected deaths	4	2	2	4	6	4	2	3	
CFR (%)	0.4	0.2	0.3	0.5	0.7	0.6	0.2	0.4	

*A delayed data entry was experienced during week 42 and the number of suspected measles cases was corrected from 830 to 833.

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- The epidemiological curve of suspected measles cases shows a decreasing trend since week 26, 2024 (Figure 9). The trend in 2024 is higher than that reported in 2023 and the 2-year average before the 2021-2022 outbreak period (Figure 10).
- During week 43-2024, a total of 752 suspected cases and 3 associated deaths were reported.
- The 3 new deaths were from 3 provinces: Helmand (1), Jawzjan (1), and Kabul (1). Out of total deaths, 2 were under five, while one was female.
- Since the beginning of 2024, a total of 51,229 suspected measles cases and 246 deaths (CFR=0.5%) were reported. Among suspected measles cases, 40,933 (79.9%) were under-five children, and 23,276 (45.4%) were females.
- Since the beginning of 2024, Balkh has reported the highest cumulative incidence of suspected measles cases per 10,000 population (32.9), followed by Khost (29.1), Urozgan (23.8), and Jawzjan (23.8) (Figure 11).



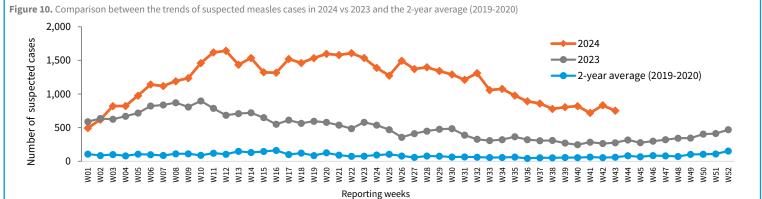


Figure 11. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 01 Jan-26 Oct 2024

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Suspected measles cumulative incidence per 10,000 population by province 01 Jan—26 Oct 2024

Measles cumulative incidence 1.6 - 5.0 5.1 - 8.9 9.0 - 15.1 15.2 - 23.8 23.9 - 32.9

Updates on the preparedness and response to the Measles outbreak

Since the beginning of 2024, the following activities have been conducted:

- A total of 29,408 children aged 9-59 months have been vaccinated against measles as part of outbreak response immunization activities across the country.
- A total of 103 SSTs (each team included 2 members) were trained on sample collection, storage, and shipment from 3 regions: Central (63 SSTs), West (3 SSTs), and South (37 SSTs) regions.
- A total of 126 measles case management kits have been distributed to WHO sub-offices across the country.
- During April and May 2024, a total of 794,676 children aged 9-59 months were vaccinated in 2 phases of the Multi-Antigen Acceleration Campaign (MAAC) in 78 districts of 25 provinces:
- [°] During the first phase, 624,767 children aged 9-59 months were vaccinated in 53 districts of 13 provinces (Kapisa, Kandahar, Logar, Zabul, Helmand, Khost, Takhar, Nangarhar, Kunar, Balkh, Faryab, Farah, and Kabul).
- [°] During the second phase, a total of 169,909 children aged 9-59 months were vaccinated in 25 districts of 12 provinces (Wardak, Bamyan, Parwan, Panjshir, Urozgan, Paktya, Paktika, Ghazni, Baghlan, Nuristan, Samangan, and Badghis).

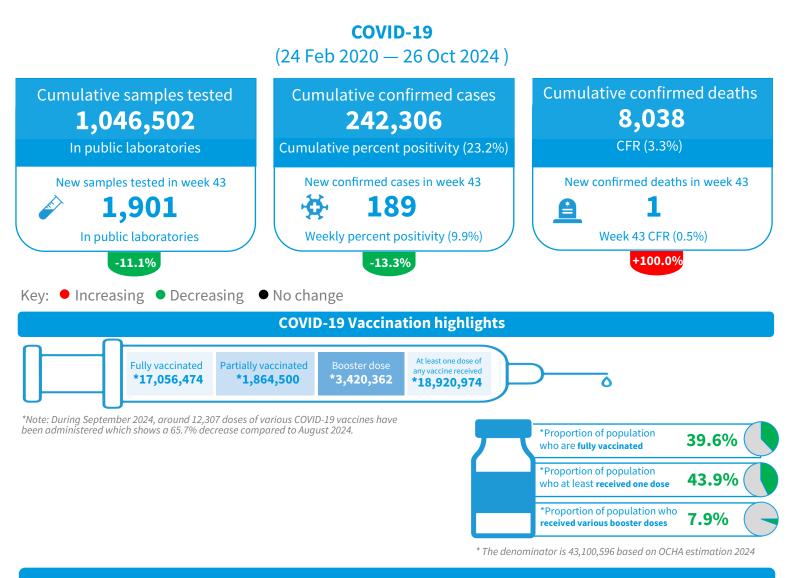
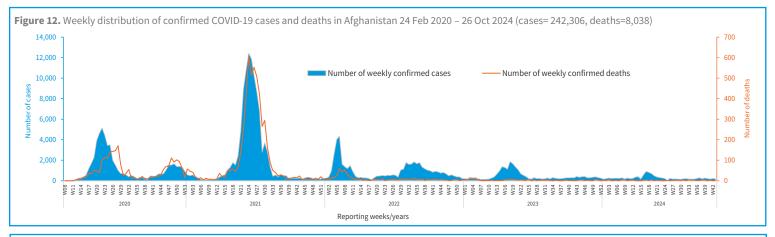


Table 5: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (01 Sep – 26 Oct 2024)

W36	W37	W38	W39	W40	W41	W42	W43	Trend line
1,899	2,546	1,720	1,966	1,856	1,572	2,138 *	1,901	$ \land \bullet $
214	281	178	264	205	165	218 *	189	\swarrow
11.3	11.0	10.3	13.4	11.0	10.5	10.2	9.9	
1	1	3	3	0	2	0	1	$- \overline{}$
0.5	0.4	1.7	1.1	0.0	1.2	0.0	0.5	
	1,899 214 11.3 1	1,8992,54621428111.311.011	1,899 2,546 1,720 214 281 178 11.3 11.0 10.3 1 1 3	1,899 2,546 1,720 1,966 214 281 178 264 11.3 11.0 10.3 13.4 1 1 3 3	1,899 2,546 1,720 1,966 1,856 214 281 178 264 205 11.3 11.0 10.3 13.4 11.0 1 1 3 3 0	1,899 2,546 1,720 1,966 1,856 1,572 214 281 178 264 205 165 11.3 11.0 10.3 13.4 11.0 10.572 1 1 3 3 0 2	1,899 2,546 1,720 1,966 1,856 1,572 2,138* 214 281 178 264 205 165 218* 11.3 11.0 10.3 13.4 11.0 10.5 10.2 1 1 3 3 0 2 0	1,899 2,546 1,720 1,966 1,856 1,572 2,138* 1,901 214 281 178 264 205 165 218* 189 11.3 11.0 10.3 13.4 11.0 10.5 10.2 9.9 1 4

*A delayed reporting was experienced during week 42 and the number of samples tested and confirmed COVID-19 cases were modified from 1,625 to 2,138 and from 155 to 218, respectively.

- The epidemiological curve of confirmed COVID-19 cases indicates a fluctuation at the lower level in the recent weeks following the peak in the week 17-2024 (Figures 12 & 13).
- During week 43-2024, a total of 1,901 samples were tested in public labs, of which 189 were positive for COVID-19 (positivity rate 9.9%) with one associated death. The number of positive cases shows a 13.3% decrease compared to the preceding week (Table 5 and Figure 13).
- Since the beginning of 2024, a total of 11,619 COVID-19 confirmed cases and 66 deaths (CFR=0.6%) have been reported. Out of the total cases, 6,313 (54.3%) were females while females represented 3 quarters of deaths (49 74.2%).
- During week 43-2024, among 189 confirmed cases, 10 (5.3%) were hospitalized, while no hospitalized cases were admitted to ICU (Figure 14).
- Since the beginning of 2024, a total of 100,901 samples of COVID-19 have been tested by public health laboratories across the country, out of which 11,619 were positive (positivity rate 11.5%), while the overall number of COVID-19 samples tested by public health laboratories reached to 1,046,502 since the beginning of the pandemic in February 2020.



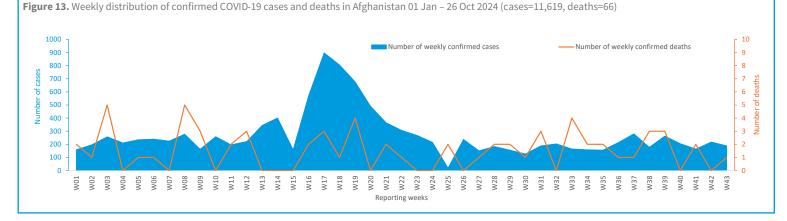
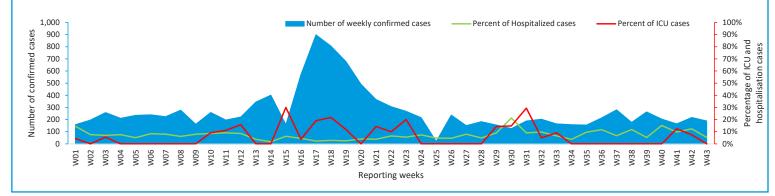


Figure 14. The weekly proportion of hospitalized and ICU cases and the number of confirmed COVID-19 cases in Afghanistan between 01 Jan-26 Oct 2024*



*The hospitalization rate was calculated among confirmed cases, while the ICU rate was calculated among hospitalized cases.

Update on the response activities to COVID-19

- Since the beginning of 2024, the below supplies have been distributed to all regional sub-offices:
 - $^\circ~$ A total of 930 VTM kits (50 units per kit).
 - $^\circ~$ A total of 1,571 COVID-19 RDT kits (25 tests per kit).

Confirmed Malaria Outbreak

(01 Jan-26 Oct 2024)



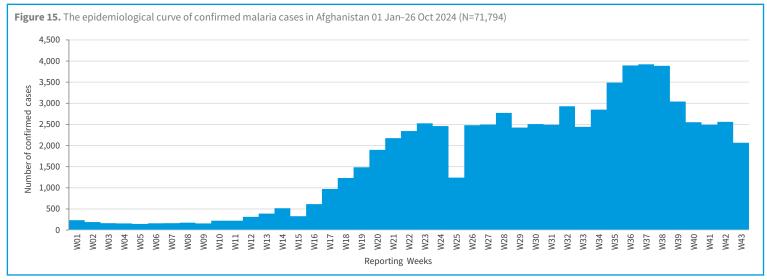
3 (0.004) Total malaria deaths (CFR %)

Table 6: Summary of the confirmed malaria outbreak in the last eight weeks in Afghanistan (01 Sep – 26 Oct 2024)

W36	W37	W38	W39	W40	W41	W42	W43	Trend line
0	0	0	0	0	1	0	0	
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
	W36 3,895 0 0.0	3,895 3,922 0 0	3,895 3,922 3,886 0 0 0	3,895 3,922 3,886 3,043 0 0 0 0	3,895 3,922 3,886 3,043 2,553 0 0 0 0 0	3,895 3,922 3,886 3,043 2,553 2,493 0 0 0 0 1	3,895 3,922 3,886 3,043 2,553 2,493 2,560 0 0 0 0 1 0	3,895 3,922 3,886 3,043 2,553 2,493 2,560 2,066 0 0 0 0 1 0 0

• The epi curve of confirmed malaria cases shows a declining trend over the past 5 weeks, after reaching its peak during week 37-2024. However, the trend of confirmed malaria cases in 2024 is higher than the 3-year average (2020-22), while closely following the trend observed in 2023 (Figure 15, 16).

- During week 43-2024, 2,066 confirmed cases with no associated death were reported from 22 provinces, which shows a 19.3% decrease in the number of cases compared to the previous week.
- Since the beginning of 2024, a total of 71,794 confirmed malaria cases with 3 associated deaths were reported from 32 provinces. Out of the total cases, 14,970 (20.9%) were under-five children, and 33,758 (47.0%) were females.
- The highest cumulative incidence of malaria per 10,000 population was reported from Nuristan (381.7) followed by Kunar (275.6), Laghman (162.4), and Nangarhar (89.8) (Figure 17).





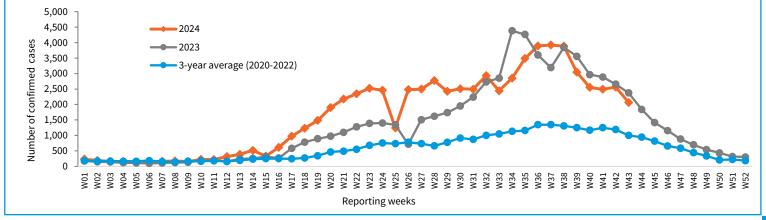


Figure 17. Confirmed malaria cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan – 26 Oct 2024

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Note: MOPH is the source of epidemiological data <u>Case definition & alert/outbreak thresholds</u>

Contact us for further information:

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